PREA Facility Audit Report: Final

Name of Facility: Eastern Pre-Release Unit

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 12/19/2016

Auditor Certification		
The contents of this report are accurate to the best of my knowledge.		
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.		~
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.		
Auditor Full Name as Signed: Jeff Kovar Date of Signature: 12/1		

AUDITOR INFORMAT	ION
Auditor name:	Kovar, Jeff
Address:	
Email:	jeff@preaauditing.com
Telephone number:	
Start Date of On-Site Audit:	2016-11-04
End Date of On-Site Audit:	2016-11-04

FACILITY INFORMAT	FACILITY INFORMATION		
Facility name:	Eastern Pre-Release Unit		
Facility physical address:	700 Flat Iron Square Road, Church Hill, Maryland - 21623		
Facility mailing address:	P.O box 122, Church Hill, Maryland - 21623		
The facility is:	County Federal Municipal State Military Private for profit Private not for profit		
Facility Type:	PrisonJail		

Primary Contact			
Name:	Bruce Sutton	Title:	Sergeant
Email Address:	Bruce.Sutton@maryland.gov	Telephone Number:	410-810-5420

Warden/Superintendent			
Name:	Ricky Foxwell	Title:	Warden
Email Address:	Ricky.Foxwell@maryland.gov	Telephone Number:	410-540-6200

Facility PREA Compliance Manager			
Name:	Bruce Sutton	Title:	Sergeant
Email Address:	Bruce.Sutton@maryland.gov	Telephone Number:	410-810-5420

Facility Health Service Administrator			
Name:	Barbara Chids-Steele	Title:	Health Service Administrator
Email Address:	bsteele@wexfordhealth.com	Telephone Number:	410-540-6776

Facility Characteristics		
Designed facility capacity:	180	
Current population of facility:	177	
Age Range	Adults:	Youthful Residents:
Facility security level/inmate custody levels:	Pre-Release	
Number of staff currently employed at the facility who may have contact with inmates:		

AGENCY INFORMATI	AGENCY INFORMATION		
Name of agency:	MD Department of Public Safety and Correctional Services		
Governing authority or parent agency (if applicable):	N/A		
Physical Address:	300 E. Joppa Rd, Towson, Maryland - 21286		
Mailing Address:			
Telephone number:	410.339.5000		

Agency Chief Executive Officer Information:			
Name:	Stephen T. Moyer	Title:	Secretary
Email Address:	Stephen.Moyer@maryland.gov	Telephone Number:	410.339.5005

Agency-Wide PREA Coordinator Information			
Name:	David Wolinski	Title:	Special Assistant
Email Address:	David.Wolinski@maryland.gov	Telephone Number:	410.339.5033

AUDIT FINDINGS

Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

A Prison Rape Elimination Act Audit of Eastern Pre-Release Unit was conducted on November 4, 2016. The purpose of the audit was to determine compliance with the Prison Rape Elimination Act standards which became effective August 20, 2012. Certified PREA Auditor William Boehnemann assisted with the agency-level interviews.

The auditor wishes to extend his appreciation to Warden Ricky Foxwell and his staff for the professionalism they demonstrated throughout the audit and their willingness to comply with all requests and recommendations made by the auditor.

The auditor would also like to recognize PREA Coordinator David Wolinski, Pre-Release System PREA Compliance Manager-David Greene, and PREA Compliance Manager Bruce Sutton for their hard work and dedication to ensure the facility is compliant with all PREA standards.

The auditor provided the facility with a Notification of Audit on September 19, 2016. The notification contained information on the upcoming audit and stated that any inmate with pertinent information should send a letter containing this information to the auditor at least 10 days prior to the onsite audit date, November 4, 2016. The auditor instructed the facility to post this notification in all housing units and throughout the facility at least six weeks prior to the onsite audit.

Approximately six weeks prior to the onsite audit, the Agency received access to the PREA Resource Center Online Audit System (OAS) and began completing the pre-audit questionnaire, and uploaded all relevant documentation. Once the pre-audit questionnaire was completed, the auditor was given access to the OAS system and began reviewing all of the information, including: the pre-audit questionnaire, policies, procedures, MOUS, and training documents.

An entrance meeting was held the morning of the onsite audit with the following persons: Maryland Correctional Pre-Release System PREA Compliance Manager-David Greene, EPRU PREA Compliance Manager-Sergeant Bruce Sutton, Facility Administrator-Charles Cave, and Captain-Robert Turner.

After the entrance meeting, the auditor was given a tour of all areas of the facility, including: Administrative Building (classroom, library, case manager's office, and recreation room), Control, Kent Dorm, small bathroom, barber shop, mud room, Talbot Dorm, Queen Annes Dorm, large bathroom, storeroom area (restricted area), dietary, dining hall, maintenance shop, and the dressing and shower area.

A total of 31 staff interviews were conducted, with at least one staff member interviewed from each interview category applicable to the facility.

Staff interviews were conducted with staff from all three shifts.

A total of 16 inmate interviews were conducted with at least one inmate interviewed from each interview category applicable to the facility.

The auditor was provided with shift assignment sheets for staff, as well as housing unit rosters for inmates. The auditor randomly selected staff and inmates to be interviewed from the information provided. All interviews were conducted one at a time in a private and confidential manner.

The auditor reviewed a sample of Human Resources files, training records for staff, contractors, and volunteers, inmate education documentation, risk screenings, and mental health referrals. The auditor also observed PREA informational posters posted in the housing units and throughout the facility.

The count on the day of the audit was 179.

Throughout the pre-audit and onsite audit, open and positive communication was established between the auditor and facility staff. During this time, the auditor discussed his concerns with Maryland Correctional Pre-Release System PREA Compliance Manager-David Greene and EPRU PREA Compliance Manager-Sergeant Bruce Sutton.

When the audit was completed, the auditor conducted an exit briefing on November 4, 2016. The auditor gave an overview of the audit and thanked the staff for all their hard work and commitment to the Prison Rape Elimination Act.

After the onsite audit, the auditor utilized the Auditor Compliance Tool for Adult Prisons and Jails as a guide in determining compliance with each standard, and created a Final Report documenting the facility's compliance. In order to determine compliance, the auditor used the information and documentation provided during the pre-audit, information obtained through inmate and staff interviews, as well as visual observations during the facility tour.

Facility Characteristics:

The auditor's description of the audited facility should include details about the type of the facility, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation.

The main building was originally constructed in 1964 as part of the correctional camp system. It is a one-story brick structure situated on 96 acres of land in a rural setting in Church Hill, Maryland, a township of Queen Anne's County. On September 1, 1978, an additional multi-purpose building was completed. It is also a one-story brick structure immediately adjacent to the housing units. The grounds include a basketball/volleyball court area, a horseshoe pit, softball field with bleachers, an outdoor visitation area with picnic tables, handball court, weightlifting building, and a large parking lot for visitors and official vehicles.

The main building consists of three dormitories with sixty bunk beds in each one and positioned along the sides of the primary corridor. Each inmate is assigned a stool and locker/cabinet. There is one large inmate lavatory with eight porcelain wash basins, three urinals, seven toilets with wall partitions, and an inmate shower room with ten operable shower heads, as well as two urinals, two washers, and two dryers. Another bathroom contains two washers and two dryers for inmate use, three porcelain wash basins, two urinals, and three toilets. There is a large dayroom that has three pool tables, one television, one big screen TV with a DVD player, table tennis, and other recreational and leisure time materials. The administrative area consist of a public entrance, small lobby, operations center, lieutenant's office, medical examination and records room, employee restroom, visitor lavatory, staff lounge, holding cell with stainless steel fixtures and an attached bed, and an inmate property storage/contraband control room. Pay telephones for inmate use are available in the main corridor. The remainder of the building includes a dining area, a small commissary, a fully functional barber shop, a small multi-purpose area with some weightlifting equipment, and other miscellaneous storage areas for recreational equipment and supplies.

The multi-purpose building has ten staff offices, two restrooms, a school classroom, a library, and a large multi-purpose area that can be subdivided with the use of partitions. This structure connected to the main building by an enclosed corridor. In the rear of the main building is a garage for maintenance equipment and other miscellaneous items. There is no perimeter fencing, but the boundaries are well marked. The facility has fire extinguishers, a manual pull alarm system, approved evacuation plans, several means of egress, several hear and smoke detectors, posted evacuation routes, and exit signs/emergency lights.

Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

Number of standards exceeded:	3
Number of standards met:	42
Number of standards not met:	0

After reviewing all information provided during the pre-audit and onsite audit, staff and inmate interviews, and visual observations made by the auditor during the facility tour, the auditor has determined the following:

Number of Standards Exceeded: 3 (115.11, 115.12, and 115.17)

Number of Standards Met: 42

(115.13, 115.14, 115.15, 115.16, 115.18, 115.21, 115.22, 115.31, 115.32, 115.33, 115.34, 115.35, 115.41, 115.42, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.73, 115.76, 115.77, 115.78, 115.81, 115.82, 115.83, 115.86, 115.87, 115.88, 115.89, 115.401, 115.403)

Number of Standards Not Met: 0

Standards

Auditor Overall Determination Definitions

- Exceeds Standard (Substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)
- Does Not Meet Standard (requires corrective actions)

Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

Policies:

MCPRS.200.0004.1 states,

A. MCPRS does not:

- 1. Tolerate staff on inmate or inmate on inmate sexual misconduct; or
- 2. Consider alleged or actual consent as a defense to an allegation of sexual misconduct.
- B. MCPRS shall ensure that existing efforts and strategies to prevent, detect, and respond to allegations of sexual misconduct comply with the applicable federal standards established under the authority of the Prison Rape Elimination Act (PREA) of 2003.

The facility has a policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. This can be found in MCPRS.200.0005.1 and MCPRS.200.0004.1.

DPSCS.020.0026 PREA Compliance clearly outlines definitions of prohibited behaviors regarding sexual abuse and sexual harassment.

MCPRS.200.0004.1 Section G. outlines sanctions for those found to have participated in prohibited behaviors.

The Prevention of Sexual Abuse in Prison-What Inmates Need to Know Brochure outlines strategies to reduce and prevent sexual abuse and sexual harassment of inmates. Inmates are provided with a copy of this brochure during intake and are required to sign an acknowledgement form.

DPSCS.020.0026 PREA Compliance states:

The Coordinator shall have sufficient time and appropriate authority to develop, implement, and oversee Department activities taken to comply with PREA standards in Department correctional and detention facilities.

The Department's Assistant Secretary- Programs and Services is the PREA Coordinator.

Special Assistant David Wolinski is the Agency's PREA Coordinator and he reports to the Deputy Secretary. This was verified by viewing the Agency's Organizational Chart that was provided during the pre-audit.

The facility has a designated PREA Compliance Manager. The PREA Compliance Manager holds the position of Sergeant and reports to the Warden.

The PREA Compliance Manager has sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. This was confirmed during the interview with the PREA Compliance Manager.

Interviews with the PREA Coordinator indicate he has sufficient time to manage all of his PREA

related responsibilities. The Agency has 23 PREA Compliance Managers whom he communicates with almost daily, through emails or by cell phone. The PREA Coordinators conducts two mandatory meetings with the PREA Compliance Managers each year. The PREA Coordinator also sends out new policy updates and other information through email, as needed, to keep the PREA Compliance Managers informed. In addition, the PREA Coordinator conducts periodic cite visits at each facility throughout the year. If an issue of non-compliance is identified, the PREA Coordinator would communicate the issue to the facility's PREA Compliance Manager. They would confer with the Warden, and jointly discuss options to correct the issue. If necessary, the problem would be addressed with the Deputy Secretary.

The Agency has six Department of Justice Certified PREA Auditors which help monitor PREA Compliance throughout the state of Maryland. As part of their duties, these staff conduct mock PREA audits on DOC facilities, and provide technical support, in an effort to ensure that all DOC facilities are PREA compliant.

115.12 | Contracting with other entities for the confinement of inmates

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

The Agency has one contract for the confinement of inmates. This contract is with Threshold, Inc. for Pre-Release Services. The auditor was provided with a copy of this contract which has a performance period from October 1, 2016 through September 30, 2018. The auditor was advised they had only one contract for the confinement of its inmates. The auditor was provided with a copy of this contract and it states "the Contractor shall operate the Center in conformance with all laws, Standards, regulations, and IDs. Standards include all state correctional system requirements for the operation of a community adult rehabilitation center pursuant to Md. Code." The contract also states the contractor "shall comply with the standards set forth in the Prison Rape Elimination Act of 2003, and with all applicable regulations issued by the U.S. Department of Justice." The auditor verified Threshold, Inc. went through a PREA audit on July 13, 2015 and successfully passed the audit.

The auditor reviewed the contract and discovered it contains an inspection clause.

The PREA Coordinator advised there is a state employee assigned as the PREA Compliance Manager for the contracted facility who oversees the facility's PREA Compliance. The PREA Coordinator affirmed the contracted facility went through, and successfully passed their PREA audit in 2015.

Since the Agency has designated their own state employee as the PREA Compliance Manager of their sole contract facility, the auditor has determined the agency is exceeding this standard.

115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

Auditor Discussion

EPRU Staffing Plan 2015 outlines the facility's staff positions.

Since August 20, 2012, the average daily number of inmates was 165. The staffing plan was based on 180 inmates.

Each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan. The auditor was advised the facility has mandatory and non-mandatory positions. The mandatory positions are always staffed. If necessary, the facility would staff the mandatory positions with overtime.

The auditor reviewed staffing plans from 2014, 2015, and 2016.

EPRU.110.0021 Sanitation Inspections states:

The Facility Administrator shall establish security/sanitation inspections procedures which encompass all areas of the institution and outer security perimeter.

- 1) The security/sanitation inspection coordinator shall be the Captain or the 10-6 Lieutenant in the absence of the Captain.
- 2) The security/sanitation inspections are divided into three zones. All shifts are responsible for conducting zone inspections.
- 3) The security inspections by officers shall be conducted on a daily basis on all three shifts using The Security Inspection Sheet (Appendix II).
- 4) Supervisors on all three shifts shall conduct a daily security/sanitation inspection of all zones of the facility using the Security Inspection Sheet (Appendix II) and the Sanitation Inspection Sheet (Appendix I of EPRU.80.0005).
- 5) The Facility Administrator and/or the Captain shall conduct weekly security/sanitation inspections of all zones of the facility and document the inspections in the logbook and on the designated FA/Captain's Weekly Security/Sanitation Sheet (Appendix IV).

The auditor was provided with sample documentation of unannounced rounds from 2015 and 2016. This documentation shows the rounds occurred on all three shifts. The facility prohibits staff from alerting other staff that these rounds are occurring.

OSPS.050.0030 Sexual Misconduct states:

A supervisor, manager, or shift commander shall:

- 1) Take reasonable actions to eliminate circumstances that may result in or contribute to an incident of sexual misconduct that include conducting and documenting security rounds to identify and deter staff sexual abuse and harassment that are performed:
- a) Randomly on all shifts;
- b) Except when necessary to prevent prohibited cross gender viewing of an inmate or as part of a legitimate facility operation, unannounced in order to prohibit staff from alerting other staff that the rounds are being conducted; and
- c) At a frequency established by the managing official

During an interview with the Facility Administrator, the auditor was advised the facility has a staffing plan and the staffing plan considers adequate staffing levels to protect inmates against sexual abuse, as well as video monitoring. The staffing plan is maintained in the audit file. The staffing plan is reviewed every September. When assessing adequate staffing levels and the need for video monitoring, the staffing plan considers:

- a. Generally accepted detention and correctional practices;
- b. Any judicial findings of inadequacy;
- c. Any findings of inadequacy from federal investigative agencies;
- d. Any findings of inadequacy from internal or external oversight bodies;
- e. All components of the facility's physical plant (including "blind spots" or areas where staff or inmates may be isolated);
- f. The composition of the inmate population;
- g. The number and placement of supervisory staff;
- h. Institution programs occurring on a particular shift;
- i. Any applicable state or local laws, regulations, or standards;
- j. The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- k. Any other relevant factors.

The PREA Compliance Manager also confirmed all of the above are considered.

The Facility Administrator stated he compares the staffing plan to the facility overtime report to see if the facility is meeting the minimum requirements. At the end of the pay period, all special assignments are tabulated to see if additional mandatory staff are needed. Currently, the facility requires four staff per shift.

If there were ever any instance where a mandatory position was not filled, the facility would use their draft list and hold over staff from the previous shift to ensure there are a minimum of four staff on duty.

The PREA Coordinator confirmed he is consulted regarding any assessments of, or adjustments to, the staffing plan for this facility. He advised he is consulted on this annually.

The auditor interviewed intermediate and/or higher level facility staff from all three shifts and confirmed supervisors from all three shifts are required to make these rounds at least once daily. These rounds are documented in the log book in medical, dietary, and in control. Supervisors make rounds through the facility from all different directions and at sporadic times in order to ensure the rounds are completely random.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	There are no youthful inmates housed at EPRU; however, the agency has policies in place to ensure compliance with this standard.
	DPDS.100.0003 Separation of Adult and Juvenile Detainees states: If a waived juvenile is remanded to the custody of the Division, the individual shall be housed in a separate unit designated for juveniles which affords no more than incidental sight or sound contact with adult detainees from outside the unit of living, program, dining, or other common areas. Any other sight or sound contact is minimized, brief, and in conformance with applicable legal requirements.
	Staff confirmed no youthful inmates are housed at EPRU.

115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

EmD.DOC.110.0026 states:

Inmate strip searches shall be conducted by correctional staff of the same sex. Only trained medical professionals are authorized to conduct an inmate body cavity search.

EPRU.110.0033.1 states:

Strip searching of a transgender or intersex inmate may not be conducted for the sole purpose of determining the inmate's genital status. If an inmate's genital status is unknown, it is to be determined through:

- a. Conversation with the Inmate.
- b. A review of available medical records.
- c. Part of a broader medical examination conducted in private by a licensed medical professional.
- d. When circumstances allow, staff should consult with a transgender or intersex inmate before conducting a search to determine the inmate's preference in the gender of the officer conducting the search.

In the past 12 months, there have not been any cross-gender strip or cross-gender visual body cavity searches conducted.

There are no female inmates housed at the facility; therefore, 115.15 (b) is not applicable.

The auditor was advised transgender inmates have not been searched for the sole purpose of determining their genital status.

OPS.110.0047 Inmate Personal Searches states:

Searches are documented in compliance with established reporting requirements.

OSPS.050.0030 Sexual Misconduct outline procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. These two policies specifically require staff of the opposite gender to announce their presence when entering an inmate housing unit.

The auditor was advised 47 security staff have received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs. This is 100% of all security staff.

The auditor was provided with staff signature sheets documenting their receipt of training specific to conducting cross-gender pat-down searches and searches of transgender and intersex inmates.

Staff interviews confirm staff have received PREA training, including, training specific to conducting cross-gender pat-down searches and searches of transgender and intersex

inmates. Staff acknowledged receiving PREA educational pocket cards. Staff acknowledged anytime a female staff member enters a housing unit, an announcement is made alerting the inmates of the female staff member entering the housing unit. Staff acknowledged inmates are able to dress, shower, and toilet without being viewed by staff of the opposite gender. Staff were also aware of the agency policy prohibiting staff from searching a transgender or intersex inmate for the sole purpose of determining their genital status. Staff indicated that if they received a transgender inmate, they would ask the inmate which gender staff they felt more comfortable being searched by and accommodate their request.

Inmates interviews confirm staff make an announcement anytime female staff enter a housing unit. Inmates indicated staff would say, "female officer coming in, make sure you are properly dressed."

115.16 Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

DCD.200.0001 Inmate Rights provides a nondiscrimination clause and also states each Warden shall ensure that newly received inmates are provided information about inmate rights, general institutional schedules, procedures and institutional plans. This orientation may be provided through group sessions or by giving the inmate an orientation package. Special assistance shall be provided to inmates with language or reading problems. Language services are provided through an agreement with LEP Interpreter Services to Ad Astra.

OSPS.050.0030 Sexual Misconduct-Prohibited states:

Inmate interpreters, inmate readers, or other types of inmate assistance are not used to communicate information required under this directive to other inmates, except under limited circumstances where a delay in obtaining an effective non-inmate interpreter would compromise the inmate's safety, the performance of first responder duties, or the investigation of an inmate's allegation.

OSPS.200.0004 Inmate-on-Inmate Sexual Conduct-Prohibited also states:

Except under limited circumstances where a delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first responder duties, or the investigation of an inmate's allegation, inmate interpreters, inmate readers, or other types of inmate assistance are not used to communicate information required under this directive to other inmates.

Language services are provided through an agreement with LEP Interpreter Services to Ad Astra. This information is made available to staff with information necessary to provide interpreter services as needed.

DPSCS has established a Limited English Proficiency Plan that contains resources and other information to further aid in providing inmates with limited English proficiency an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

The agency or facility documents the limited circumstances in individual cases where inmate interpreters, readers, or other types of inmate assistants are used.

In the past 12 months, there have not been any instances where interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under 115.64, or the investigation of the inmate's allegations.

Staff interviews confirm the facility utilizes a language line to communicate with limited English speaking inmates and a TTY for the hearing impaired. Staff interviews indicate staff were aware of the agency policy prohibiting staff from using another inmate to translate for a limited English inmate that was sexually abused. Staff indicated they would use a staff interpreter or would call the language line. Staff indicated they had no knowledge of inmate interpreters ever

being used for this reason.

At the time of the site visit, there were not any limited English speaking inmates housed at the facility; however, the auditor tested the language line and was able to connect to a Spanish speaking interpreter. The auditor confirmed Spanish speaking inmates are provided with PREA educational brochures written in Spanish. The auditor also confirmed the facility had PREA information written in Spanish, posted in all housing units and throughout the facility.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

AMD.050.0041 Background Checks states:

The Department shall conduct a criminal history records check on all new employees in accordance with federal and State statue and regulation to detect criminal convictions that may be related specifically to job performance. "Employee" means an individual assigned to or employed by the Department in a full-time, part-time, temporary, or contractual position regardless of job title or classification.

COMAR 12.10.01.05 Correctional Training Commission states:

This regulation does not prevent an agency head from setting higher criminal history standards than specified in this regulation.

DPCS 020.0026 PREA Compliance states:

The Human Resources Services Division (HRSD) shall adopt hiring policy consistent with federal PREA standards prohibiting the hiring or promotion of anyone who may have contact with inmates, and prohibiting the enlisting of the services of any contractor, who may have contact with inmates, who:

- a) Engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution.
- b) Was convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
- c) Was civilly or administratively adjudicated to have engaged in the activity described in section .04B(3) of this directive.

COMAR 12.15.01.19 State Rap Back Program states:

If an employer or regulatory authority is authorized by State statue to receive a revised printed statement, the Central Repository, shall:

- 1) Enroll the employer or regulatory authority in the State Rap Back Program;
- 2) Maintain a record of each previously processed individual who works for, or is regulated by an authorized employer or regulatory authority;
- 3) Issue a revised printed statement for each previously processed individual when new information is added to the individual's CHRI indicating:
- a) An arrest
- b) The issuance of an arrest warrant
- c) The filing of a charging document
- d) A disposition of conviction
- e) A verdict of not criminally responsible; or
- f) A disposition of probation before judgement; and
- 4) Send the revised printed statement to the employer, the regulatory authority, and the

covered individual who is the subject of the printed statement.

COMAR 17.04.03.10 Employment Background Checks states:

The appointing authority shall determine the necessity of investigating the background of an eligible individual for purposes of verification of suitability for employment. When appropriate and job-related, areas of investigation may include but are not limited to employment history, academic credentials, military records, criminal conviction records, and personal references.

DPSCS.020.0026 Employment Background Checks states:

The HRSD shall consider incidents of sexual harassment when determining to hire or promote an employee or contract with a service provider if the individual may have contact with an inmate.

Hiring Guidelines for the Position of Correctional Officer include:

- 1) PREA (Prison Rape Elimination Act)- Any applicant who has engaged in sexual abuse in a prison, jail, lock up, community confinement facility, juvenile facility, or other institution shall be permanently disqualified from DPSCS employment.
- 2) Any applicant who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, or coercion, or if the victim did not consent or was unable to consent or refuse shall be permanently disqualified from DPSCS employment.
- 3) Any applicant who has been civilly or administratively adjudicated to have engaged in sexual abuse in a prison, jail, lock up, community confinement facility, juvenile facility, or institution, or has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, or coercion, or if the victim did not consent or was unable to consent or refuse, shall be permanently disqualified from DPSCS employment.
- 4) Any applicant who has been terminated from previous employment or resigned in lieu of termination after having found to have engaged in sexual harassment shall be permanently disqualified from DPSCS employment.

DPSCS 020.0026 PREA Compliance states:

Before hiring a new employee to perform duties involving contact with an inmate, the Human Resources Division shall:

- (a) Conduct a criminal background records check; and
- (b) Consistent with federal, state, and local law, make a best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse or a resignation during a pending investigation of an allegation of sexual abuse."

DPSCS 020.0026 PREA Compliance states:

The HRSD shall conduct criminal records background checks every five years on employees or a contractor's services provider who may have contact with an inmate.

PREA DBM DPSCS JOBAPS Application Form is a form that all applicants are required to sign. The form contains an affirmation which states, "I hereby affirm that this application contains no willful misrepresentation or falsifications and that this information given by me is true and complete to the best of my knowledge and belief. I am aware that should investigation at any time disclose any misrepresentation or falsification, I shall be subject to immediate termination and/or my application will be disapproved, my name removed from the eligibility list, and that I

will not be certified for employment in any position under the jurisdiction of the Department of Budget & Management. I am aware that a false statement is punishable under law by fine or imprisonment or both."

The auditor was provided with a Reference/Employment Verification Form that is used when contacting agencies where an applicant was previously employed.

The auditor was provided with a copy of mandated polygraph questions the DPSCS asks applicants. These questions are specifically about prior sexual abuse and sexual harassment.

The auditor viewed the employment application form and confirmed the required questions pertaining to sexual abuse and sexual harassment are asked as a part of the application.

The auditor was provided with a copy of a Wexford New Hire Offer letter, which states hiring is contingent upon passing a background investigation including criminal history check.

The auditor was advised that criminal background records checks have been conducted on all staff, contractors, and volunteers who have contact with inmates.

The auditor requested to see a random sample of personnel files, including, the employees' application and criminal background records checks. The auditor was advised there were no files available from employees who were hired prior to 2000, due to the agency purging files. The auditor discovered during his review that all employees sampled, who were hired after 2000, had documentation of criminal background records check. The auditor was advised that effective May 1, 2014, the agency added questions in their application that were specific to PREA and sexual misconduct. The auditor discovered during his review that all employees sampled, who were hired after May 1, 2014, had an application questionnaire completed in their file. This questionnaire included questions specific to 115.17 (a)-1.

Interviews with Human Resources staff indicate the hiring application asks the applicant questions specifically about prior sexual harassment. If the applicant were to answer yes any of the four questions in the application pertaining to sexual misconduct, the applicant would be disqualified for employment. The auditor was advised that all employees, including contractors, have gone through a criminal background records check. All background investigations go through the Central Hiring Unit. Employees who go up for a promotion go through a vetting process which include a fingerprint and criminal history check. All new employees are required to go through a polygraph examination. The auditor was advised that when an employee is hired, their information is entered into a database. If an employee is ever arrested, an alert would automatically be sent to IID for their review and investigation. This is done instantaneously and exceeds the standard requirement of criminal background records checks once every five years.

During the application process, the employee answers questions pertaining to sexual misconduct in the application. During the interview, the applicant is asked these same questions again verbally. The responses are documented on the PREA interview form. In addition, during orientation, the employee signs a PREA acknowledgement form (responding to the same four questions). Staff going up for a promotion, are required to respond to these questions on the promotional application and also during the promotional interview. There is

an affirmation clause employees are required to sign, on the application, the orientation acknowledgement form, and the promotional application form.

Human Resources staff acknowledged upon receipt of receiving a release of information, any previous sexual misconduct information would be provided to the new employer by IID.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	During the pre-audit, the auditor was advised the agency/facility has not installed or updated a video monitoring system, or other monitoring technology since August 20, 2012.
	During the pre-audit, the auditor was advised the agency/facility has not installed or updated a video monitoring system, or other monitoring technology since August 20, 2012.
	During an interview with the Facility Administrator, the auditor confirmed the information listed above.
	During an interview with the Agency Head, the auditor was a advised that when designing, acquiring, or planning substantial modifications to facilities, the facility reviews the floor plan to identify any blind spots, hidden places, or areas that could present a potential problem area. The Agency strategically places cameras in an effort to cover blind spots.

115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

OSPS.050.0030 Sexual Misconduct, IIU.110.0011 Investigating Sex Related Offenses, and IIU.220.0002 Evidence Collection are Policies that have been established designating the Agency Intelligence and Investigative Division (IID) as the responsible party for most sexual abuse and/or harassment investigations. These policies outline the responsibilities of the Investigators and procedures for conducting the investigations as well. The investigators do follow a uniform evidence protocol that is adapted from or otherwise based on the most recent edition of the U.S. DOJ's Office on Violence Against Women publication "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents" or similarly comprehensible and authoritative protocols developed after 2011.

OSPS.050.0030 Sexual Misconduct states:

If the alleged sexual misconduct involves sexual abuse, the assigned investigator shall (if medically appropriate or necessary to preserve evidence) offer the victim access to a medical forensics examination at no cost to the victim that is performed by a Sexual Assault Forensics Examiner (SAFE) or a Sexual Assault Nurse Examiner (SANE). These exams are conducted at Mercy Hospital in Baltimore.

OSPS.050.0030 Sexual Misconduct states:

If requested by the victim and the services are reasonably available, have one of the following accompany, for the purpose of support, the victim through the forensic examination and investigation interviews: a qualified victim advocate, a Department employee who is otherwise not involved in the incident and has received education and training concerning sexual assault and forensic examination issues and has been appropriately screened and determined to be competent to serve in this role, or a non-Department community-based organization representative who meets the criteria for a Department employee.

Facility Procedure EPRU.110.0017.1 outlines the facility procedures for handling evidence.

115.21 (b)-1: N/A (No youth are currently being housed at the facility).

The Agency is in the process of formalizing an MOU with Maryland Coalition Against Sexual Assault (MCASA). The auditor spoke with a representative from MCASA and discovered MCASA would serve as a liaison between the agency and victim advocates from local rape crisis centers. The auditor was advised these services would be provided even though the formal MOU has not been finalized. The auditor was provided with email correspondence as well as a draft MOU, documenting the agency's efforts to establish an MOU with an outside victim advocate.

Staff interviews indicate staff were knowledgeable of the agency's protocol for obtaining usable physical evidence if an inmate alleges sexual abused, as well as who was responsible for conducting sexual abuse investigations (IID). Staff interviews confirm that initial victim advocate services would be provided by a victim advocate, provided by the hospital. Staff advised follow-up services would be coordinated through Maryland Coalition Against Sexual

Assault (MCASA).

Interviews with one of the SAFE/SANE staff at Mercy Hospital and confirmed the hospital's SAFE/SANE staff would conduct forensic examinations for any inmate who was sexually abused. The auditor was advised there are approximately 30 SAFE/SANE examiners who work for Mercy Hospital and there was always at least one available. SAFE/SANE staff work a regular schedule at the hospital and also have an on-call rotation as a back-up in the event that additional staff are ever needed at any given time.

115.22 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

MCPRS.200.0004.1 states:

A prompt, thorough, and objective investigation of every complaint of alleged inmate on inmate sexual misconduct shall be completed in accordance with procedures established in COS.200.0004.

IIU.110.0011 Investigating Sex Related Offenses states:

The Department shall promptly, thoroughly, and objectively investigate each allegation of employee or inmate misconduct involving a sex related offense according to a uniform protocol based on recognized investigative practices that maximize evidence collection to support effective administrative dispositions and, if appropriate, criminal prosecution of the identified perpetrator.

OSPS.050.0030 Sexual Misconduct states:

An IID investigator, or an investigator designated by IID, shall conduct a prompt, thorough and objective investigation of every alleged sexual misconduct according to applicable statutory, regulatory, case law, contract, Departmental procedures, or other reasonably accepted standards related to collecting and preserving evidence, interviewing victims and witnesses, conducting and using polygraph examinations, identifying suspects, preserving an individual's personal dignity and legal rights, and maintaining confidentiality of the investigation.

OSPS.200.0004 Inmate Sexual Misconduct states:

An IID investigator, or an investigator designated by IID, shall conduct a prompt, thorough and objective investigation of alleged inmate on inmate sexual conduct according to applicable statutory, regulatory, case law, contract, Departmental procedures, or other reasonably accepted standards related to collecting and preserving evidence, interviewing victims and witnesses, conducting and using polygraph examinations, identifying suspects, preserving an individual's personal dignity and legal rights, and maintaining confidentiality of the investigation.

The link to agency's website can be found at http://dpscs.maryland.gov/prea/index.shtml. The Agency website does have the information regarding investigation policy and also contact information for filing a complaint to the Investigative Division.

In the past 12 months, the facility has received one allegation of sexual abuse or sexual harassment. This investigation is being investigated criminally and is currently ongoing.

The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation. This information is logged and tracked at IID.

Agency staff interviews indicate allegations of sexual abuse are conducted by IID and allegations of sexual harassment are conducted by facility investigators.

Investigative staff interviews indicate all detectives at IID have the authority to conduct criminal investigations and have police powers.

115.31 **Employee training Auditor Overall Determination:** Meets Standard **Auditor Discussion** OSPS.050.0030 Sexual Misconduct states: The head of a unit, or a designee, responsible for the custody and security of an inmate shall ensure that each employee attends approved training related to preventing, detecting, and responding to acts of sexual misconduct. OSPS.200.0004 Inmate Sexual Misconduct states: The head of a unit or a designee, is responsible for ensuring that each supervisor, manager, shift commander, and contractor who has contact with an inmate under the authority of the unit head is familiar with Department policy preventing inmate on inmate sexual conduct. COMAR 12.10.01.16 mandates annual in-service training for all employees consisting of 18 total hours at minimum. During the pre-audit, the auditor was provided lesson plans and class curriculum for PREA training. Training records provided during the pre-audit were reviewed showing employees are receiving the required PREA training. Training is tailored to the gender of the inmates at the facility. The auditor reviewed lesson plans specifically for Managing Female Offenders. Employees who are reassigned from facilities housing the opposite gender are given additional training. There are 47 staff currently employed by the facility, who may have contact with inmates, who were trained or retrained on the PREA requirements enumerated above. This is 100% of all staff. Between trainings, the agency provides employees who may have contact with inmates with refresher information about current policies regarding sexual abuse and sexual harassment. This is done through distribution of the PREA Brochure, Pamphlet, as well as any updates or changes in policy as provided by the PREA Coordinator. Each staff member is also provided with a pocket-size PREA card. The agency documents that employees who may have contact with inmates understand the training they have received through employee signature or electronic verification. The auditor was provided with a sample of signature sheets.

during in-service training.

Interviews with staff confirm staff receive PREA training during the academy and annually

115.32 Volunteer and contractor training **Auditor Overall Determination:** Meets Standard **Auditor Discussion** All volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. The auditor was provided with a sample of signature sheets from volunteers and contractors, documenting their PREA education. All volunteers and contractors receive a brochure and sign an acknowledgement form. All volunteers and contractors who have contact with inmates have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. This information is located in the PREA brochure. During the site visit, the auditor interviewed one contractor and confirmed contractors and volunteers are trained on their responsibilities regarding sexual abuse/sexual harassment prevention, detection, and response, per agency policy and procedure. The auditor was advised medical contractors receive PREA training both from their company (Wexford) and the Department of Corrections. This training is both classroom and online training, and includes information on the agency's zero tolerance policy.

115.33 Inmate education

Auditor Overall Determination: Meets Standard

Auditor Discussion

OSPS.200.0004 Inmate Sexual Misconduct and OSPS.050.0030 Sexual Misconduct both state:

The head of a unit or a designee responsible for the custody and security of an inmate shall ensure that departmental and unit policy prohibiting inmate on inmate sexual conduct, procedures for filing a complaint, and inmate rights related to inmate on inmate sexual conduct are effectively communicated to each inmate as part of inmate orientation, by inclusion in the facility's inmate orientation paperwork, and the facility's inmate handbook.

DOC.200.0001 requires that each Warden ensure that newly received inmates are provided information about inmate rights, general institutional schedules, procedures and institutional plans. This orientation may be provided through group sessions or by giving the inmate an orientation package, and special assistances shall be provided to inmates with language or reading problems.

MCPRS.200.0005 is the facility policy that mandates PREA education to inmates.

The auditor was advised that 465 inmates who were admitted during the past 12 months were given this information at intake. This is 100% of all intakes.

The auditor was advised that 465, or 100%, of those inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures responding to such incidents within 30 days of intake.

The auditor was advised all inmates were educated during their initial intake. The auditor was provided with a sample of signature sheets, documenting Inmate PREA education.

Inmate education is accessible to all inmates including those who are limited English proficient, deaf, visually impaired, otherwise disabled, or who have limited reading skills.

During the site visit, the auditor observed PREA education posted in all housing units and throughout the facility. PREA posters were written in both English and Spanish. The language line may be used to communicate with limited English speaking inmates. The language line was tested during the site visit and found to be operable.

During an interview with intake staff, the auditor was advised all inmates receive PREA education during the intake process. PREA brochures are given to inmates upon arrival. Intake staff verbally go over this information with the inmates. Inmates also receive PREA education during orientation, within 30 days of intake. Intake staff confirmed inmates are required to sign an acknowledgement, acknowledging receipt and understanding of the PREA education.

Inmate interviews confirm inmates receive PREA education the same day they arrive at the facility.

115.34 | Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

The agency currently has 30 investigators that have received specialized training for conducting sexual assault investigations in a confinement setting. These investigators are assigned to the Agency's Investigation and Intelligence Division (IID). During the pre-audit, the auditor was provided lesson plans, quiz, and other training related material for specialized training for the investigative staff. Training certificates were provided as supporting documentation of training.

OSPS.050.0030 Sexual Misconduct requires that to the extent possible, but in every case where the allegation of alleged sexual misconduct involves sexual abuse, the investigator assigned to investigate the allegation shall have received specialized training related to conducting sexual abuse investigations in a confinement setting.

OSPS.200.0004 Inmate Sexual Misconduct requires that to the extent possible, but in every case where the allegation of alleged inmate on inmate sexual conduct involves sexual abuse, the investigator assigned to investigate the allegation shall have received specialized training related to conducting sexual abuse investigations in a confinement setting.

IIU.110.0011 is a policy specific to investigators for investigation sex related offenses (in confinement). This policy outlines all requirements, duties, and responsibilities of the investigator during a sexual assault investigation.

Investigative staff interviews confirm all investigators received basic training in conducting sexual abuse investigations during the police academy. In addition to this training, all investigators received a formal block of training specifically for PREA investigations. The auditor was advised this was an all day class and include topics, such as:

- *Techniques for interviewing sexual abuse victims
- *Proper use of Miranda and Garrity warnings
- *Sexual abuse evidence collection in confinement settings
- *The criteria and evidence required to substantiate a case for administrative or prosecution referral

Investigators also confirmed that agency policy requires allegations of sexual abuse or sexual harassment are referred to IID, unless the allegation does not involve potentially criminal behavior. IID investigators have police powers and the legal authority to conduct criminal investigations.

115.35 Specialized training: Medical and mental health care **Auditor Overall Determination:** Meets Standard **Auditor Discussion** 115.35 DPSCS.020.0026 (PREA) mandates the PREA Coordinator to ensure PREA related trainings comply with federal PREA standards including training for medical and mental health care. Wexford Health (contracted medical provider) Policy mandates staff training that includes (specifically) "Review of this policy, the Prison Rape Elimination Act (2003), and any other applicable state or federal laws." There is currently one medical staff member who works regularly at this facility who received the training required by agency policy. This represents 100% of all medical and mental health care providers who work at the facility. The auditor was provided with the certificate documenting completion of this training. Interviews of Medical staff indicated confirmed she received specialized training regarding PREA and this included a Power Point presentation that covered topics such as how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence

of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

115.41 | Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

MCRS.200.0005.1 states:

MCPRS shall apply a screening instrument as part of the intake and facility transfer process; and at other times deemed appropriate to assess each inmate's risk for being sexually abused or being sexually abused towards other inmates. Each Facility Administrator shall designate custody staff to apply the PREA Intake Screening Instrument to each newly received inmate within 72 hours of arrival in order to assess the risk of sexual victimization or potential abusiveness.

MCRS.200.0005.1 states:

Each Facility Administrator shall designate custody staff to apply the PREA Intake Screening Instrument to each newly received inmate within 72 hours of arrival in order to assess the risk of sexual victimization or potential abusiveness.

The auditor was advised there were 465 inmates entering the facility within the past 12 months whose length of stay was for 72 hours or more, who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility. This is 100% of all inmates whose stay was 72 hours or more.

MSPRS.200.0005.1 states:

Case management staff shall re-apply the screening instrument for each inmate within 30 days of the inmate's arrival at an MCPRS facility and as needed, based upon additional information received by the facility since previous screening. All subsequent assessments shall be processed in accordance with .05, C., D., and E. of this directive.

The auditor was advised that 465 inmates who have entered the facility within the past 12 months whose length of stay in the facility was for 30 days or more, were reassessed for their risk of sexual victimization or of being sexually abusive with 30 days after their arrival at the facility based upon additional, relevant information received since intake. This is 100% of all inmates whose length of stay was for 30 days or more.

The auditor was provided with a copy of their objective screening instrument. The instrument is a point additive system. If an inmate answers affirmatively to being a victim of sexual abuse, or four or more other questions pertaining to victimization, the inmate is identified as "At Risk of Victimization." If an inmates answers affirmatively to ever sexually assaulting another inmate while incarcerated, or answers affirmatively to three or more questions pertaining to abusiveness, the inmate is identified as "At Risk of Abusiveness."

The auditor was provided with a sample of risk screenings and determined confirmed initial screenings are conducted within 72 hours and follow up risk screenings are conducted by case management within 30 days of intake.

OSPS.200.0005 states:

An inmates is not disciplined for refusing to answer or not disclosing complete information in

response to screening questions related to:

- a) The presence of a mental, physical, or developmental disability;
- b) The inmate being or perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- c) Previous sexual victimization; or
- d) The inmate's own perception of vulnerability and;

Appropriate controls to be in place for facility dissemination of information collected during screening to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

Screening staff confirmed inmates are screened the same day they arrive at the facility. The auditor was advised the screenings are conducted one on one with screening staff in a private and confidential manner. The inmate is asked a set of questions outlined on the screening instrument. The information is then used to determine the inmate's risk of sexual victimization and sexual abusiveness. Screening staff confirmed case management conducts an additional screening within 30 days of intake. Screening staff also confirmed inmates are not disciplined for refusing to answer any questions related to the risk screening.

Inmate interviews confirmed inmates are screened when they arrive at the facility. The auditor was advised case management rescreens the inmates within 30 days of intake.

115.42 Use of screening information

Auditor Overall Determination: Meets Standard

Auditor Discussion

The agency/facility uses information from the risk screening to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk or being sexually victimized from those at high risk of being sexually abusive. The auditor was provided with a tracking spreadsheet used to track inmates identified as at risk for victimization, as well as those identified as at risk for abusiveness. The spreadsheet identified four inmates identified as at risk for victimization and no inmates who identified as at risk for abusiveness. The auditor was advised that in the event the facility housed both types of inmates, inmates identified as at risk for victimization would be housed separately from those inmates identified as at risk for abusiveness.

The agency/facility makes individualized determinations about how to ensure the safety of each inmate.

The agency/facility makes housing and program assignments for transgender or intersex inmates in the facility on a case-by-case basis. During the site visit, there were no transgender or intersex inmates housed at the facility.

Interviews with the PREA Compliance Manager and Staff Responsible for Risk Screening confirm inmates identified as at risk for victimization are housed separately from the inmates who are identified as at risk for abusiveness. The auditor was advised Talbot housing unit is used for abusers and Kent housing unit is used for victims.

The PREA Compliance Manager and screening staff confirmed transgender and intersex inmates are reviewed twice per year. The agency would consider whether the placement would ensure the inmate's health and safety. The agency would also consider whether the placement would present management or security problems. The facility would take into consideration the inmate's own views in regards to their own safety when determining housing. If housed at the facility, the auditor was advised the transgender inmates would be housed with the general population at the front of the housing unit so staff can keep a closer eye on them and ensure their safety.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	OSPS.200.0005 Sexual Misconduct states: Placement of an inmate in special confinement housing shall be in accord with provisions for special confinement housing established in the Case Management Manual. Case management Manual (DOC.100.0002) mandates instances in which inmates may be placed in segregated housing and that an inmate assigned to administrative segregation shall be reviewed by the case management team at least once every 30 days.
	Policies in place mandate compliance with all aspects of the PREA standards and these policies are Agency-wide policies/procedures. There is no segregated housing at this facility.
	Staff confirmed there have not been any inmates who were identified as being at risk of sexual victimization were held in involuntary segregated housing in the past 12 months.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.51 OSPS.050.0030, section 5-E provides information regarding filing a complaint: (1) A complaint of alleged sexual misconduct may be submitted by the following individuals:
	(a) The victim;
	(b) An individual with knowledge of an incident of alleged sexual misconduct; or
	(c) A "third party" on behalf of the victim or other individual who has knowledge of the alleged sexual misconduct.
	(2) A complaint of alleged sexual misconduct may be submitted in the following formats:
	(a) In writing (includes electronic documents); or
	(b) Verbally.
	(3) A complainant may remain anonymous.
	(4) To effectively reduce actual or implied barriers to filing a complaint, an individual may file a complaint of sexual misconduct with any one or all of the following without regard to chain of command or assignment:
	(a) Within the Department:
	(i) An employee;
	(ii) A supervisor, manager, or shift commander;
	(iii) The head of a unit;
	(iv) The Intelligence and Investigative Division (IID);
	(v) The Inmate Grievance Office; or
	(b) Outside the Department:
	(i) The Office of the Attorney General; or
	(ii) Other private or public office able to receive and immediately forward the complaint of alleged sexual misconduct to the Department.
	(5) An employee receiving a complaint of or otherwise has knowledge of alleged sexual misconduct shall immediately report the complaint to a supervisor, manager, shift commander,

or head of the unit followed by the appropriate written format used to document misconduct.

- (6) If a complaint of alleged sexual misconduct is received by a supervisor, manager, shift commander, or head of the unit at a facility other than the facility where the alleged sexual misconduct occurred, the head of the unit responsible for the facility receiving the complaint shall immediately notify the Intelligence and Investigative Division (IID) of the complaint.
- (8) Information concerning a complaint of alleged sexual misconduct is confidential and may only be available to individuals who have an established role in the reporting, processing, investigating, and resolving the alleged sexual misconduct and immediate and continued care of the victim.

OSPS.200.0004 outlines the exact same process as above for any instance of inmate-on-inmate sexual conduct.

Facility policy MCPRS.200.004.1, section D also covers all aspects of filing sexual assault and harassment complaints. This policy satisfies all requirements set forth in this standard.

The PREA brochure states the inmate can report to any Supervisor, Chaplain, security staff person, medical staff, or any other employee including the PREA Coordinator. The auditor was also provided with PREA Hotline Posters written in English and Spanish. The toll-free hotline number is provided for inmates to file a complaint, and this can be an anonymous report. This service is through Life Crisis Center and has been in effect since December of 2013.

Interviews with staff indicate they were well aware of several methods available for inmates to report instances of sexual abuse and harassment. They were also aware they have available to them the PREA hotline number for confidential reporting of inmate sexual abuse and harassment. Inmate interviews indicated inmates are knowledgeable of different avenues to report sexual abuse and harassment. Most were able to relay to the auditor in interviews that they could report directly to any staff member (in person), they could write a request or more informal note to a staff member, they could call the PREA hotline, and they could contact friends or family on the outside to report for them. Staff also indicated any verbal report would be documented immediately after any safety concerns of an inmate were addressed. During the site visit, the PREA hotline number was called by the auditor and was verified as a viable means to confidentially report sexual abuse and harassment.

115.52	Exhaustion of administrative remedies		
	Auditor Overall Determination: Meets Standard		
	Auditor Discussion		
	OPS.185.0002 Administrative Remedy Procedures states: The Department does not permit the use of an informal resolution process or ARP to resolve complaints of rape, sexual assault, sexual harassment, sexual abuse sexual misconduct, inmate on inmate sexual conduct, or other areas afforded protections by standards established under the authority of the Prison Rape Elimination Act (PREA) and related Department procedures, therefore this standard does not apply to this facility.		
	Interviews with facility staff confirmed the above as being not applicable to this facility.		

115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

OSPS.050.0030 Sexual Misconduct states:

If requested by the victim and the services are reasonably available, have one of the following accompany, for the purpose of support, the victim through the forensic examination and investigation interviews:

- (i) A qualified victim advocate;
- (ii) A Department employee who is otherwise not involved in the incident and has received education and training concerning sexual assault and forensic examination issues and has been appropriately screened and determined to be competent to serve in this role; or
- (iii) A non-Department community-based organization representative who meets the criteria for a Department employee established under §.05G(3)(b)(ii) of this directive.

OSPS.200.0004 Inmate Sexual Misconduct states:

The same as above for instances of inmate-on-inmate sexual conduct.

The auditor was advised the agency has an MOU pending with Maryland Coalition Against Sexual Assault (MCASA) for victim advocate services. The auditor spoke with a representative from MCASA and was advised MCASA would serve as a liaison between the agency and victim advocates from local rape crisis centers. The auditor was advised MCASA would provide these services even without a formal MOU.

In the event a victim advocate was unavailable through MCASA, the auditor was advised the facility social worker would provide victims with mailing addresses and telephone numbers for local, state, or national victim advocacy or rape crisis organizations. The auditor was also advised the hospital provides victim advocates to all victims of sexual abuse. In the event an inmate was transported to the hospital for a forensic examination, a victim advocate would be made available by the hospital. The PREA Coordinator provided the auditor with email correspondence and a draft MOU with MCASA, documenting the agency's efforts to enter into an MOU for outside victim advocate services.

The facility provides inmates with access to such services by enabling reasonable communication between inmates and these organizations in as confidential a manner as possible.

The facility informs inmates, prior to giving them access to outside support services, the extent to which such communications will be monitored.

The facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law.

Inmates confirmed the facility makes PREA victim services information available to inmates in the PREA brochures. Inmates were aware that discussions with victim advocates are confidential.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	OSPS.200.0004 states: A complaint of alleged inmate on inmate sexual conduct may be submitted by the following individuals: a) The victim; b) An individual with knowledge of an incident of alleged inmate on inmate sexual conduct; or c) A "third party" or other individual who has knowledge of the alleged inmate on inmate sexual conduct.
	Inmate brochures inform inmates that third-party reports are accepted.
	A toll free PREA hotline is available for public reporting/third party reporting. This information is also made available through the agency website.

115.61 Staff and agency reporting duties Auditor Overall Determination: Meets Standard **Auditor Discussion** OSPS.050.0030 and OSPS.200.0004 state that a complaint of alleged sexual misconduct (or inmate-on -inmate sexual conduct) may be submitted by the following individuals: (a) The victim; (b) An individual with knowledge of an incident of alleged sexual misconduct; or (c) A "third party" on behalf of the victim or other individual who has knowledge of the alleged sexual misconduct. (2) A complaint of alleged sexual misconduct may be submitted in the following formats: (a) In writing (includes electronic documents); or (b) Verbally. (3) A complainant may remain anonymous. (5) An employee receiving a complaint of or otherwise has knowledge of alleged sexual misconduct shall immediately report the complaint to a supervisor, manager, shift commander, or head of the unit followed by the appropriate written format used to document misconduct.

- (6) If a complaint of alleged sexual misconduct is received by a supervisor, manager, shift commander, or head of the unit at a facility other than the facility where the alleged sexual misconduct occurred, the head of the unit responsible for the facility receiving the complaint shall immediately notify the Intelligence and Investigative Division (IID) of the complaint.
- (8) Information concerning a complaint of alleged sexual misconduct is confidential and may only be available to individuals who have an established role in the reporting, processing, investigating, and resolving the alleged sexual misconduct and immediate and continued care of the victim.
- F. Processing a Complaint.
- (1) A complaint of alleged sexual misconduct received anonymously shall be accepted and processed the same as a complaint received from an identified source.

Facility policy MCPRS.200.0004.1 also addresses these same above processes and reiterates duties to detect, report, and respond.

OSPS.200.0004 states:

An employee receiving a complaint of or who otherwise has knowledge of alleged inmate on inmate sexual conduct shall immediately report the complaint to a supervisor, manager, shift commander, or head of the unit followed by submission of the appropriate written format used to document an inmate rule violation.

Information concerning a complaint of alleged inmate on inmate sexual conduct is confidential and may only be available to individuals who have an established role in the reporting, processing, investigation, and resolution of the alleged inmate on inmate sexual conduct and immediate and continued care of the victim.

IIU.020.0002 also addresses the responsibilities of investigators and maintaining confidentiality and complying with all applicable Constitutional and statutory law and judicial rules when conducting an assigned investigation.

Random staff interviews indicated all are aware of their duty to report any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. Interviews with medical/mental health staff indicated an awareness that they are required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to a designated supervisor or official immediately upon learning of it, and that at the initiation of services to an inmate they do disclose the limitations of confidentiality and their duty to report. Warden and other staff interviews disclosed all allegations of sexual abuse and harassment are forwarded to IID. IID conducts all investigations for sexual abuse, but facility may investigate harassment complaints.

115.62 Agency protection duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

MCPRS.200.0004.1 requires staff to safeguard any inmate that is learned to be at risk of possible sexual abuse or harassment.

In the past 12 months, there have not been any instances where the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse.

Interviews with the Agency Head, Facility Administrator, and Random Staff indicated an acute awareness of responsibility to protect and safeguard any inmate that is subject to a substantial risk of imminent sexual abuse, and the facility staff takes immediate action to protect the inmate. This may be accomplished through housing assignment changes of either the possible victim or possible predator. This could also be accomplished by facility transfer and reassignment of staff if there is a staff member involved.

115.63 Reporting to other confinement facilities **Auditor Overall Determination:** Meets Standard **Auditor Discussion** MCPRS.200.0004.1 states: The Warden or designee shall: Ensure that an allegation that is reported which occurred at another facility is reported to the head or appropriate office of the agency where the alleged abuse occurred. This notification must occur no later than 72 hours after receiving the allegation and must be documented. In the past 12 months, there have not been any allegations the facility received that an inmate was abused while confined at another facility. MCPRS.200.0004.1 states: The Warden or designee shall: Ensure that an allegation that is reported which occurred at another facility is reported to the head or appropriate office of the agency where the alleged abuse occurred. This notification must occur no later than 72 hours after receiving the allegation and must be documented. In the past 12 months, there have not been any allegations of sexual abuse received from other facilities. Interviews with Agency Head and Facility Administrator indicate that agency policy requires that, upon receiving an allegation that an inmate was sexually abused while confined at

another facility, the head of the facility must notify the head of the facility or appropriate office

of the agency or facility where sexual abuse is alleged to have occurred. The Facility Administrator confirmed information received would be forwarded to IID for investigation.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MCPRS.200.0004.1 outlines first responder duties.
	MCPRS addresses and outlines staff responsibilities for filing a complaint; processing a complaint; investigating, documenting, and resolving a complaint; and sanctions.
	OSPS.050.0030 Sexual Misconduct also addresses processing a complaint, and investigating, documenting, and resolving a complaint. This includes response and evidence collection, interviewing victims and witnesses, polygraph examinations, preserving an individual's personal dignity and legal rights, and maintaining confidentiality during an investigation. Miranda and Garrity warnings and criteria for evidence necessary to substantiate administrative action and support criminal prosecution is also addressed in these policies.
	MCPRS.200.0004.1 states: A supervisor, manager, shift commander, PCM, or head of unit receiving a complaint shall immediately: preserve any evidence at the scene of the alleged incident.
	The auditor was advised that in the past 12 months there have not been any allegations reported that an inmate was sexually abused.
	Through interviews with random staff, the auditor determined that there is a general awareness of staff first responder duties. All staff interviewed were able to articulate they would first separate any identified inmates (victims and/or suspects), secure these inmates separate from each other and in a safe place. Inmates would be instructed not to do anything that may damage or destroy evidence (such as changing clothes, washing, brushing teeth,

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MCPRS.200.0004.1 outlines the agency's coordinated response plan which outlines the responsibilities of all staff. Staff also utilize the PREA Response and Containment Checklist to ensure take proper response.
	The Facility Administrator confirmed the facility follows the above coordinated response plan.

showering, using the restroom, eating, or drinking).

115.66 Preservation of ability to protect inmates from contact with abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

AFSCME and Teamsters Union MOU- The Agency is apart of a collective bargaining agreement through the AFSCME and Teamsters Union. The auditor was provided with an MOU which states:

The employer retains the sole and exclusive authority for the management of its operations and may exercise all rights, powers, duties, authority and responsibilities conferred upon and invested to it by all laws including, but not limited to, the Collective Bargaining Law (Title 3, State Personnel and Pensions Article). It is agreed by the parties that any section of this MOU that conflicts with current law, in particular the Collective Bargaining Law (title 3, State Personnel and Pensions Article), can be changed by management after negotiations with the Union, to the extent required by Article 32 (Mid Contract Negotiations). It is understood and agreed by the parties that the Employer possesses all other power, duty and right to operate and manage its departments, agencies and programs and carry out constitutional, statutory and administrative policy mandates and goals.

Md. State Personnel and Pensions Code 9-302 Management Rights states:

The State, through its appropriate officers and employees, has the right to:

- (1) (I) determine the mission, budget, organization, numbers, types and grades of employees assigned, the work projects, tours of duty, methods, means, and personnel by which its operations are to be conducted, technology needed, internal security practices, and relocation of its facilities; and
- (ii) maintain and improve the efficiency and effectiveness of governmental operations;
- (2) determine the:
- (I) services to be rendered, operations to be performed, and technology to be utilized; and
- (ii) overall methods, processes, means, and classes of work or personnel by which governmental operations are to be conducted;
- (3) hire, direct, supervise, and assign employees;
- (4) (I) promote, demote, discipline, discharge, retain, and law off employees; and
- (ii) terminate employment because of lack of funds, lack of work, under conditions where the employer determines continued work would be inefficient or nonproductive, or for other legitimate reasons;
- (5) set the qualifications of employees for appointment and promotion, and set standards of conduct;
- (6) promulgate State or Department rules, regulations, or procedures;
- (7) provide a system of merit employment according to the standard of business efficiency; and
- (8) take actions, not otherwise specified in this section to carry out the mission of the employer.

A review of the Agency's collective bargaining agreement as well as Md. Code, indicates the Agency would be prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. Such an agreement would

be a direct conflict with Md. Code.

During interviews with the Agency Head, the auditor was confirmed the agency has entered into or renewed collective bargaining since August 20, 2012. The auditor was advised that the agreement permits the agency to remove alleged staff sexual abusers from contact with any inmate pending an investigation or a determination of whether and to what extent discipline is warranted.

115.67 | Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

OSPS.050.0030 Sexual Misconduct states:

An individual (staff or inmate) reporting, participating in the investigation or resolution of, or who is a victim of alleged sexual misconduct is monitored for a minimum of 90 days from the date the incident was reported to detect actual, or feared, retaliation and if retaliation is identified or feared take action to stop the actual or feared retaliation that may include:

- a) Application of available medical or mental health services or counseling;
- b) Changes to inmate housing assignments and staff work assignments; and
- c) Continued monitoring as deemed appropriate.

The PREA Compliance Manager is the designated staff member charged with monitoring retaliation.

In the past 12 months, there have been no instances or retaliation reported.

During an interview with the Agency Head, the auditor was advised the agency protects inmates and staff from retaliation through the investigation process and retaliation monitoring. The agency has the ability to transfer inmates from one facility to another, if there was a need. Staff could be transferred to another post and/or to another facility, if needed.

During an interview with the Facility Administrator, the auditor was advised staff would keep open communication with whoever reported the abuse. The abusers would be removed from close proximity with whoever reported. Staff would make the reporter aware of how to report any retaliation they encounter. If retaliation was suspected, staff would identify who was responsible for the retaliation and take disciplinary action against them.

During an interview with the Designated Staff Member charged with Monitoring Retaliation, the auditor was advised he would monitor the inmate's actions and behavior. He would monitor to see if the inmate is coming out of his dorm and if he is eating. He would also monitor requests to see if any information suggest retaliation is occurring. Monitoring would continue for a minimum of 90 days. Monitoring would continue beyond 90 days, if necessary. The auditor was advised monitoring would continue as long as necessary.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Case Management Manual prohibits the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers.
	In the past 12 months, there have not been any inmates held in involuntary segregated housing who have alleged to have suffered sexual abuse.
	During an interview with the Facility Administrator, the auditor confirmed the agency has a policy prohibiting the placement of inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas, unless an assessment has determined there are no alternative means of separation from likely abusers. If an inmate was housed in involuntary segregated housing for this reason, they would only be housed here until alternative housing could be arranged.

115.71 | Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

IIU.110.0011 (Investigating Sex Related Offenses) is a policy specifically dedicated to investigating sex related offenses. This policy states:

A. The Department shall promptly, thoroughly, and objectively investigate each allegation of employee or inmate misconduct involving a sex related offense according to a uniform protocol based on recognized investigative practices that maximize evidence collection to support effective administrative dispositions and, if appropriate, criminal prosecution of the identified perpetrator.

- B. Department personnel assigned to conduct an investigation of alleged employee or inmate misconduct involving a sex related offense shall be trained in techniques related to conducting investigations of sex related offenses in the correctional setting.
- C. Department personnel assigned to conduct an investigation of alleged employee or inmate misconduct involving a sex related offense shall perform investigative activities professionally with due consideration for the emotional state of the victim resulting from the physical and emotional trauma and personal embarrassment resulting from the sex related offense.

IIU.110.0011 states:

Investigative reports are maintained according to an established retention schedule, which requires that the report is maintained as long as the employee is employed by the Department or the inmate is under the authority of the Department plus five years.

Substantiated allegations of conduct that appear to be criminal are referred for prosecution.

Interview of investigators indicated that allegations normally would be responded to right away. and that third-party investigations would be handled just as any other investigation of an alleged incident of sexual misconduct. Investigators do receive training specific to conducting sexual abuse investigations in confinement and this specialized training was a seven-hour training block. The training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative or prosecution referral. During interviews, investigators further stated the first steps of their investigation would normally be to talk to the victim. They would respond immediately, unless it is after hours and it is an allegation that can wait until the next day (sexual touching, etc.). However, if penetration was involved they would always respond immediately. They would interview the victim, collect all the evidence, interview witnesses and potential witnesses, submit the evidence to the state police crime lab. If it is a criminal matter, they would refer for criminal charges. Evidence collections would include gathering victim clothing, Getting DNA swabs from any suspects, collecting witness statements, photographs, etc. Investigators would discuss possible charges with a prosecutor in the event evidence is discovered that may support criminal charges. If determined that staff violated policy, an administrative investigation would be opened on that staff member. They would review policy and the facts to determine whether the staff violated policy. Administrative and criminal investigations are documented the same. Documentation of who, what, when, where, how, are all listed in the reports. All evidence is included in the report, including results from DNA tests, victim, suspect, witness statements, and any other evidence. Cases would be referred for prosecution when the investigator determines there is enough evidence to warrant a prosecution.

There have been no substantiated allegations of conduct that appear to be criminal that were referred for prosecution since August 20, 2012.

During the site visit, the auditor visited the IID and reviewed several investigations from several different facilities. There was only one investigation available to review for this facility, and the determined adequate processes and measures are being made by investigators to comply with all aspects of the PREA standards relating to investigations.

115.72 **Evidentiary standard for administrative investigations Auditor Overall Determination:** Meets Standard **Auditor Discussion** IIU.110.001 (Investigating Sex Related Offenses) Section, 5-H-2 states: Upon concluding an investigation involving an inmate as a victim of a sex related offense and based on a preponderance of evidence, the investigator shall advise the victim inmate if the investigation resulted in the incident being determined to be: (a) Substantiated meaning an allegation that was investigated and determined to have occurred; (b) Unsubstantiated meaning an allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred; or (c) Unfounded meaning an allegation was investigated and determined to not have occurred. Investigative staff interviews indicated a preponderance of evidence is the evidentiary standard they use when investigating allegations of sexual abuse and/or harassment. A review of investigative files confirmed a preponderance of the evidence is being used when

determining whether or not to substantiate allegations of sexual abuse or sexual harassment.

115.73 | Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

IIU.110.001 (Investigating Sex Related Offenses) Section, 5-H-2 states: Upon concluding an investigation involving an inmate as a victim of a sex related offense and based on a preponderance of evidence, the investigator shall advise the victim inmate if the investigation resulted in the incident being determined to be:

- (a) Substantiated meaning an allegation that was investigated and determined to have occurred;
- (b) Unsubstantiated meaning an allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred; or
- (c) Unfounded meaning an allegation was investigated and determined to not have occurred. The investigator shall document victim notification under §.05H(2) of this directive in the investigative report recording:
- (a) The name of the individual who notified the victim;
- (b) The date, time, and location that the victim was notified; and
- (c) How the victim was notified.

OSPS.050.0030 requires (under section 5-H): H. Victim Notification.

- (1) When notified by an investigator under §.05G(4)(c) of this directive, if the allegation was sexual abuse, the head of the unit responsible for the victim inmate shall ensure that the victim inmate is notified of the investigator's determination that the allegation was substantiated, unsubstantiated, or unfounded.
- (2) Except when an allegation of sexual abuse is determined to be unfounded, the head of the unit responsible for the victim inmate shall, for as long as the inmate is under the authority of the Department, ensure that the inmate is notified of the following situations concerning the employee who victimized or is alleged to have victimized the inmate:
- (a) The employee is no longer assigned to the inmate's housing unit;
- (b) The employee is no longer assigned at the inmate's facility;
- (c) If aware, the employee is criminally charged for an offense related to the sexual abuse that occurred within the facility; and
- (d) If aware, the employee is convicted on a charge related to the sexual abuse that occurred within the facility.
- (3) A record of a notification made under §§.05H(1) and (2) of this directive shall be maintained in the victim inmate's base file and include the following information:
- (a) Case number;
- (b) Content of the notification;
- (c) Date of the notification;
- (d) Location where the notification was made;
- (e) Printed name and signature of the employee making the notification; and
- (f) The inmate's signature acknowledging notification or, if the inmate refuses to sign for the notification, "Refused to Sign" and the employee's signature.

The same requirements listed above can be found in OSPS.200.0004 in regards to inmate-on-inmate sexual conduct.

There has been one allegation reported within the past 12 months; however, this investigation has not been completed. For this reason, there is no documentation of notifications at this facility. A review of investigation records from other facilities within the Maryland Department of Corrections confirm notifications are documented in the investigative report.

Interviews with the Facility Administrator indicated IID notifies all inmates of the results of any investigation of other information requiring inmate notification. The facility also receives a copy of any notification and this is maintained in the inmate's base-file. Investigative staff interviews indicated they notify the inmate and the PREA Compliance Manager at the facility. The inmate is told verbally and the PREA compliance Manager receives the notification by mail. The investigators document the time and date of inmate notification in their report.

Auditor Overall Determination: Meets Standard Auditor Discussion Disciplinary sanctions are listed in MCPRS.200.0004.1. Sanctions state: An MCPRS employee is subject to disciplinary action, up to and including termination of employment with the Department, it is determined that the employee: a. Except under exigent circumstances, did not perform responsibilities established under this directive, or

b. Neglected or violated other duties or responsibilities that contributed to an incident of inmate on inmate sexual misconduct.

Standards of Conduct page 20-21, identify three categories of unacceptable behavior according to severity. Third Category Infractions are the most serious and included in this group is unprofessional personal relationship or contacts with inmate, offender, or client. Third Category infractions shall result in termination from State service and the employee shall be suspended pending termination from State service.

OSPS.050.0030 Section 5-I states: (1) An employee is subject to disciplinary action, up to and including termination of employment with the Department if it is determined that the employee:

- (a) Except under exigent circumstances, did not perform responsibilities established under this directive; or
- (b) Neglected or violated other duties or responsibilities that contributed to an incident of sexual misconduct.
- (2) An employee determined to have committed sexual misconduct is in violation of Department Standards of Conduct and is subject to:
- (a) A penalty under the Standards of Conduct, up to and including termination of employment with the Department;
- (b) Criminal prosecution; and
- (c) If applicable, notification of a relevant licensing authority

The auditor was advised the disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies.

In the past 12 months, there have not been any staff from the facility who have violated agency sexual abuse or sexual harassment policies.

115.77 | Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

Auditor Discussion

OSPS.050.0030, identifies volunteers and contractors in the definition of an employee. This Policy further states in section 5-I:

- (2) An employee determined to have committed sexual misconduct is in violation of Department Standards of Conduct and is subject to:
- (a) A penalty under the Standards of Conduct, up to and including termination of employment with the Department;
- (b) Criminal prosecution; and
- (c) If applicable, notification of a relevant licensing authority.
- (3) A contractor determined to have committed sexual misconduct is:
- (a) Considered to be in violation of terms or conditions of a contract or other agreement establishing the relationship between the contractor and the Department or agency;
- (b) Subject to sanctions according to provisions of the contract or agreement;
- (c) Is subject to criminal prosecution; and
- (d) If applicable, notification of a relevant licensing authority.
- (4) A complaint of alleged sexual misconduct made in good faith based upon a reasonable belief that the alleged sexual misconduct occurred may not be considered a false report or lying, even if the required investigation does not establish sufficient evidence to substantiate the allegation of sexual misconduct.

During an interview with the Facility Administrator, she indicated in the case of any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer they would not allow the contractor/volunteer back in the building during the investigation. Criminal charges may be filed if necessary or justified.

In the past 12 months, there have not been any contractors or volunteers who have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates.

The facility takes appropriate remedial measures and considers whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

During an interview with the Facility Administrator, he indicated in the case of any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer their access to the facility would be revoked (even for minor violations of policy).

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse.

Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse.

In the past 12 months, here has been only one allegation of sexual abuse or sexual harassment reported. This investigation is still ongoing.

The facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. The facility considers whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.

The Facility Administrator advised inmates can be charged with voluntary or involuntary sexual acts. He stated sanctions are based on their classification sanction. Sanctions for a guilty finding would be based on the category they fall in. The inmate may face having their good time revoked, loss of visits, loss of work opportunities, loss of phone, and may be placed in disciplinary segregation. Sanctions would be proportionate to the nature and circumstances of the abuses committed, the inmates' disciplinary histories, and the sanctions imposed for similar offenses by other inmates with similar histories. Mental disability or mental illness is also considered.

There are no mental health staff assigned to Eastern Pre-Release Unit. The auditor was advised that if an inmate needed mental health treatment, they would be transported to Brockbridge Correctional Facility. If it is determined the inmate is mentally unable to be housed at Eastern Pre-Release Unit, the inmate would be transferred to Patuxent Correctional Facility.

The agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact.

MCPRS.200.0004.1 states:

A complaint of alleged inmate on inmate sexual misconduct made in good faith may not be considered a false report, even if the required investigation does not establish sufficient evidence to substantiate the allegation of inmate on inmate sexual abuse.

The agency prohibits all sexual activity between inmates.

The agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.

115.81 | Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

MCPRS.200.0005.1 states:

Case management staff shall forward all PREA screening instruments which indicate a potential PREA Victim/Abuser to mental health staff for further evaluation.

The follow-up meetings are offered within 14 days of the intake screening.

The auditor was advised that 100% of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner.

Medical and mental health staff maintain secondary materials documenting compliance with the above required services. The auditor was provided with a PREA Follow-up form that is used to document these services being offered.

All prison inmates who have previously perpetrated sexual abuse, as indicated during the screening pursuant to 115.41, are offered a follow-up meeting with a mental health practitioner. The follow-up meetings are offered within 14 days of the intake screening. In the past 12 months, there have been no inmates who have previously perpetrated sexual abuse housed at the facility. Medical and mental health staff maintain secondary materials documenting compliance with the above required services. The auditor was provided with a PREA Follow-up form that is used to document these services being offered.

Information related to sexual victimization or abusiveness that occurred in an institutional setting is not strictly limited to medical and mental health practitioners. The information shared with other staff is strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.

Medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.

Two inmates who disclosed prior sexual victimization were interviewed during the site visit. Both inmates acknowledged being offered mental health services. Once of the inmates refused these services. The other inmate advised he was transported to Brockbridge Correctional Facility to be seen by their mental health staff. The inmate acknowledged this occurred approximately a week after the risk screening.

During the interview with the staff member responsible for risk screenings, the auditor was confirmed inmates who disclose prior victimization/abuse are transported to Brockbridge Correctional Facility for evaluation and treatment. This staff member advised the inmate would typically be transferred for their evaluation typically the same day of the screening.

Medical staff acknowledged obtaining informed consent from an inmate before reporting about prior sexual victimization that did not occur in an institutional setting.

115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

Inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgement.

Medical and mental health staff maintain secondary materials documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis.

Inmate victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

Treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Interviews with medical staff indicated inmate victims of sexual abuse do receive timely and unimpeded access to emergency medical treatment and crisis intervention services. This typically occurs immediately for medical and as soon as possible thereafter for crisis intervention services. All services provided are determined according to the medical or mental health provider's professional judgement. One of the staff members who has previously acted as a first responder to sexual abuse advised he immediately separated the inmates, took actions so neither the victim or abuser destroyed any physical evidence, contacted IID, and contacted medical and mental health staff. The auditor was advised the inmate was seen by mental health staff the following day.

115.83 Ongoing medical and mental health care for sexual abuse victims and abusers **Auditor Overall Determination:** Meets Standard **Auditor Discussion** The facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The facility attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners. Medical staff indicated medical and mental health services are consistent with community level care. Medical staff advised they would provide comfort, care, and stabilization treatment to the

115.86 | Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

The facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded.

In the past 12 months, there have not been any allegations reported; therefore, there was no documentation of completed sexual abuse incident reviews.

The facility ordinarily conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation.

The sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.

The facility prepares a reports of its findings from sexual abuse incident reviews including, but not necessarily limited to, determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section and any recommendations for improvement, and submits such report to the facility head and PREA Compliance Manager.

The facility implements the recommendations for improvement or documents its reasons for not doing so.

115.86 MCPRS.200.0004.1 is facility policy that includes information pertaining to incident reviews and review team responsibilities.

Facility Administrator interview indicated the facility does have an incident review team that consists of upper-level administration, first line supervisors, medical and mental health staff, investigative staff, and the PREA Compliance Manager. During the incident review, the review team discusses each event in depth and discuss it with the different department heads. Collectively, they brainstorm on corrective preventative measures and make policy changes so they can aggressively address issues, and do so in a timely manner.

The PREA compliance Manager stated during the interview that the facility prepares a report of its findings from the reviews, including any determinations per Standard 115.86 (d) -1 though (d) -5 and any recommendations for improvement. The PREA Compliance Manager prepares the report and it is forwarded to the Facility Administrator for review and approval. The auditor was advised there has been only one incident requiring a sexual abuse incident review within the past few years; therefore, there have been no trends noticed. At the conclusion of an incident review, any recommended changes would be implemented if at all possible

The interview conducted with a member of the Incident Review Team indicated the review team does consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or

perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility. The team also examines the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse, and assesses whether monitoring technology should be deployed or augmented to supplement supervision by staff. They also assess the adequacy of staffing levels in that area during different shifts.

Incident reviews are documented on a standardized form titled "Sexual Abuse Incident Review". This form contains general information to be provided as well as blanks to input narratives in response to certain questions.

115.87 Data collection **Auditor Overall Determination:** Meets Standard **Auditor Discussion** OSPS.020.0027 PREA Investigations Tracking and Review states: The Department's Internal Investigative Division (IID) is the primary investigative body for all PREA related allegations and shall collect and maintain data regarding PREA related criminal and administrative investigations, which are required to be reported to IID. The IDD shall: (1) Uniformly collect and maintain data for each reported allegation of sexual abuse at correctional facility under the authority of the Department that, at a minimum, is necessary to respond to data reporting required by the Survey of Sexual Violence conducted by the Department of Justice. (2) Be responsible for developing forms necessary to collect data required under this directive. (3) Annually report PREA related data to the PREA Coordinator, or a designee. (4) By June 30 of each calendar year, report sexual violence data from the previous calendar year to the Department of Justice. The PREA Coordinator, or a designee shall: (1) Aggregate the incident-based sexual abuse data annually. (2) Maintain review and collect data as needed from all available incident-based documents,

including reports, investigative files, and sexual abuse incident reviews.

The auditor was provided with a tracking spreadsheet which is used by IID to track and collect key data from PREA investigations.

The auditor was provided with an Annual PREA Report from 2015. This report is a collection of incident-based data for 2015, and compares such data to the data collected in 2014. This report was signed off on by the PREA Coordinator and the Deputy Secretary.

The auditor was provided with a completed SSV 2-State Prison Systems Summary Report that the Agency completed for data received during 2015. The auditor was also provided with a completed SSV 3- Jail Summary Report from 2015 that collects data specifically for each facility. The auditor was advised this information was submitted to the Department of Justice before June 30, 2016.

A review of the Annual PREA Report 2015 indicates data was collected and aggregated for the Agency's contract facility, Threshold, Inc.; however, during these two years, no allegations were reported at this facility.

115.88 Data review for corrective action Auditor Overall Determination: Meets Standard Auditor Discussion

OSPS.020.0027 PREA Investigations Tracking and Review states:

The PREA Coordinator, or a designee shall:

- (1) Aggregate the incident-based sexual abuse data annually.
- (2) Maintain review and collect data as needed from all available incident-based documents, including reports, investigative files, and sexual abuse incident reviews.
- (3) Ensure that all aggregated sexual abuse data is included in an annual report that:
- (a) Includes an assessment of the Department's sexual abuse prevention, detection, and response policies, practices, and training:
- (b) If applicable, identifies Department-wide problem areas or problems within specific correctional facilities:
- (c) Is used to facilitate corrective action at the Department and correctional facility levels;
- (d) Compares the current calendar year's data and activities with that available from previous years;
- (e) Assess the Department's progress in addressing sexual abuse; and
- (f) Is approved by the Secretary and made available to the public through the Department's public website that redact information:
- (I) That would present a clear and specific threat to the safety and security of a correctional facility before publication indicating the nature of the redacted information; and
- (ii) Related to personal identifiers.
- (4) Securely maintain incident-based and aggregate data ensuring only authorized personnel have access to the information.
- (5) Maintain sexual abuse data for at least 10 years from the date received."

During the pre-audit, the auditor was provided with the Agency's Annual PREA Report from 2015. A review of this report indicates the Agency reviews and collects aggregated data pursuant to 115.87. The auditor confirmed the report contains identified problem areas and ongoing corrective action taken by the Agency.

A review of the Annual PREA Report 2015 indicates the Agency reviewed and collected data from 2014 and 2015 for all of its facilities. This report includes a comparison of the current year's data as well as ongoing corrective action that the agency has taken since the PREA standards became effective in 2012.

A review of the report indicates the report contains an assessment of the Agency's progress in addressing sexual abuse as well as future goals to continue to achieve compliance.

A review of the Agency's website (http://dpscs.maryland.gov/prea/index/shtml) confirms the Annual PREA Reports from 2013, 2014, and 2015 are posted and available to the public. A review of these reports indicates all three reports were approved by both the PREA Coordinator and the Deputy Secretary.

Through interviews with the Agency Head and PREA Coordinator, it was confirmed that the agency reviews data collected and aggregated pursuant to 115.87 in order to assess and

improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training. In order to improve policies, the Agency, looks for contributing factors to see if certain patterns exist, or certain facilities have certain common problems that can be addressed. The Agency also looks at facilities with low incidents to see if those facilities can provide information to improve facility practices at facilities with higher a incident rate of sexual abuse. Policy dictates that this information is securely retained. The auditor was advised this information is securely retained by IID, and that it was maintained in the State Archives, indefinitely. All information gathered is taken into consideration and reviewed. Recommended corrective action is adhered to. The Agency prepares an annual report of findings from its data review and corrective actions for each facility, as well as the agency as a whole. This information is documented in a written report and published on the Agency website. Personal identifiers and sensitive security material is redacted from the annual report. The Agency indicates the nature of the materials redacted. Annual reports are approved by the Agency Head.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	OSPS.020.0027 PREA Investigations Tracking and Review states:
	The PREA Coordinator, or a designee shall:
	Ensure that all aggregated sexual abuse data is included in an annual report that:
	Is approved by the Secretary and made available to the public through the Department's
	public website that redacts information:
	(I) That would present a clear and specific threat to the safety and security of a correctional
	facility before publication indicating the nature of the redacted information; and
	(ii) Related to personal identifiers.
	Securely maintain incident-based and aggregate data ensuring only authorized personnel have access to the information.
	Maintain sexual abuse data for at least 10 years from the date received.
	The Department is required to collect data sufficient to answer all of the questions from the
	Bureau of Justice Statistics (BJS) Survey on Sexual Violence.
	The auditor was provided with a memo from the Director of the Internal Investigative Unit
	stating, "Effective May 9, 2014, all PREA Investigations from Calendar Year 2013 forward
	have been and will continue to be electronically retained on a shared Group Drive on a
	DPSCS server. Accessibility of the information will be limited to the Director of the Internal
	Investigative Unit and one (1) designee to ensure confidentiality. Upon closure, investigations will be scanned and saved to the specified folder titled "PREA Investigations" for retention.

determine if the alleged abuser is still incarcerated or employed by the agency, plus an

The new retention process ensures compliance, because the investigations can be retained indefinitely. This method simplifies the process of reviewing each PREA investigation yearly from the Department of General Services-Hall of Records prior to their annual purge of files, to

additional five years for the required retention.

A review of the Agency website (https://www.dpscs.state.md.us/prea/index.shtml) indicates the Annual PREA Report 2015 was posted. This report includes data collected from the one private facility the Agency contracts with, Threshold, Inc.

The auditor reviewed Annual PREA Reports from 2013, 2014, and 2015, that were posted on the Agency's website. A review of the data available on the Agency website indicates the reports contain statistical information, and there are no personal identifiers listed in the reports.

Interviews with the PREA Coordinator indicate the agency reviews data collected and aggregated pursuant to 115.81 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training. Policy dictates that all investigations are securely retained. They are maintained by IID in the State Archives, indefinitely. All information collected is taken into consideration. Corrective action recommended is adhered to.

115.401 | Frequency and scope of audits

Auditor Overall Determination: Meets Standard

Auditor Discussion

During the onsite audit the auditor was provided with access to, and toured, all areas of the facility inmates have access to. The auditor was provided with documentation related to the pre-audit questionnaire, and was provided with additional information while onsite. The auditor retained this documentation and has taken appropriate actions to ensure it is securely retained.

The auditor was provided with a office to conduct private, one-on-one interviews with both inmates and staff.

Six weeks prior to the onsite audit, the auditor provided the facility with an audit notification, containing the auditor's name and address. This notification was posted in all housing units and throughout the facility. The notification advised any inmate with relevant information to mail the auditor a detailed letter at least 10 days prior to the onsite audit. During the site visit, the auditor observed the Audit Notification posted in all housing units. Inmates indicated the Audit Notification has been posted for several weeks. The auditor received one letter immediately from an inmate immediately after the site visit.

115.401 (a) and 115.401 (b) were audited during the Agency Audit and determined not to meet standards due to the fact that the agency did not have at least one third of its facilities audited each year during Audit Cycle 1. In addition, the agency did not ensure that each facility within the agency was audited during Audit Cycle 1. For this reason, the auditor documented on the Agency Audit that the Agency did not meet this standard. Since this standard was previously audited at the agency-level, and the facility meets all other aspects of 115.401, the auditor has determined the facility meets the 115.401 standard.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The phrase below was located on the Agency website:
	"Copies of PREA audits are available to the public upon written request: PREA Coordinator Office of the Assistant Secretary – Programs & Services 300 E. Joppa Road, Suite 1000 Towson, MD 21286 Or email: PREA@dpscs.state.md.us"
	Due to the fact that copies of PREA reports, as well as information on how to access them, is made readily available to the public, the auditor has determined the facility meets this standard.

Appendix: Provision Findings

115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes

115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator		
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes	
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes	
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes	

115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes

115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".)	yes

115.13 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into	yes

consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring?	
Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring?	yes
Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring?	yes

115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na

115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20,2017.)	na

115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates?	yes

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes

115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross- gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all	yes

aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	
Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes

115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes

115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates?	yes

115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency: perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes

115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes

115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes

115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na

115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na

115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes

115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes

115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na

115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.)	yes

115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na

115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes

115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes

115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes

115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes

115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes

115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes

115.33 (c)	Inmate education	
	Have all inmates received such education?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes

115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes

115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment?	yes

115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.)	na

115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere?	yes

115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31?	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32?	yes

115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes

115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes

115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes

115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes

115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a: Referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: Request?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes

115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes

115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes

115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes

115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes

115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes

115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes

115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes

115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes

115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations?	yes

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes

115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes

115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security?	yes

115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes

115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes

115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	na
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	na

115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	na
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	na

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	na
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	na
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	na

115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	na
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	na
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	na
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	na
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	na

115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	na

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes

115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes

115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes

115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes

115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes

115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes

115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes

115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes

115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes

115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes

115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes

115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes

115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes

115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes

115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes

115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes

115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes

115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes

115.71 (I)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na

115.73 (c)	Reporting to inmates	
	Following a inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following a inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes

115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes

115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes

115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes

115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes

115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes

115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes

115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes

115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes

115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes

115.78 (g)	Disciplinary sanctions for inmates	
	Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes

115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes

115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes

115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes

115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes

115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes

115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes

115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	na

115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)	na

115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes

115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes

115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes

115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes

115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes

115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes

115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes

115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes

115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes

115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes

115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes

115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes

115.89 (d)	Data storage, publication, and destruction		
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes	

115.401 (a)	Frequency and scope of audits	
	During the three-year period starting on August 20, 2013, and during each three-year period thereafter, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once.? (N/A before August 20, 2016.)	no

115.401 (b)	Frequency and scope of audits	
	During each one-year period starting on August 20, 2013, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited?	no

115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes

115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes

115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes

115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.)	yes